

**SUBMISSION OF PROPOSED DRAWING AMENDMENT FOR APPROVAL BY
EXAMINER (37 CFR 1.121(a)(3)(ii) r 37 CFR 1.121(b)(3)(ii))**

Docket No.
09005/012001

In Re Application Of: Wilkins n et al.

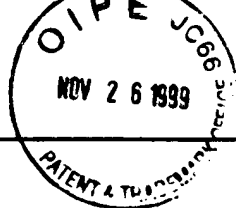
Serial No.
08/957,512

Filing Date
October 24, 1997

Examiner
To be assigned

Art Unit
2504

Invention: USING A HIGH LEVEL PROGRAMMING LANGUAGE WITH A MICROCONTROLLER



Address to:
Assistant Commissioner for Patents
Washington, D.C. 20231

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Attached please find:

(check applicable items)

- ☐ a sketch in permanent ink
- ☒ a copy of the original drawing(s) with red ink

showing proposed changes to the drawing(s) in this application for which the approval of the examiner is requested.

Signature

Pehr B. Jansson, Reg. No. 35,759
Schlumberger Austin Product Center
8311 North RR 620, P.O. Box 200015
Austin, TX 78720-0015
Tel: 512-331-3748
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Enclosures: Fig. 4, Fig. 16, Fig. 18

Dated: November 22, 1999

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Signature of Person Mailing Correspondence

MARY L. Thompson

Typed or Printed Name of Person Mailing Correspondence

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Applicati n	08/957,512	
	Filing Date	October 24, 1997	
	First Named	Wilkinson et al.	
	Group Art Unit	2504	
	Examiner Name	To be assigned	
Total Number of Pages in This Submission	17	Attorney Docket Number	09005/012001

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input checked="" type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> To Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below): Acknowledgement Postcard
Remarks Preliminary Amendment		

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Pehr B. Jansson, Reg. No. 35,759
Signature	
Date	November 22, 1999

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: November 22, 1999			
Typed or printed name	Mary L. Thompson		
Signature		Date	November 22, 1999

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AMENDMENT TRANSMITTAL LETTER (Large Entity)Applicant(s): **Wilkinson et al.**

Docket No.

09005/012001

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Examiner

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Group Art Unit

2504Invention: **USING A HIGH LEVEL PROGRAMMING LANGUAGE WITH A MICROCONTROLLER**
TO THE ASSISTANT COMMISSIONER FOR PATENTS:

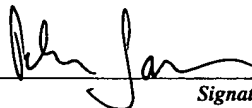
Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	136 -	105 =	31 x	\$18.00	\$558.00
INDEP. CLAIMS	15 -	12 =	3 x	\$78.00	\$234.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$792.00

- ☐ No additional fee is required for amendment.
- ☒ Please charge Deposit Account No. **19-0597** in the amount of **\$792.00**
A duplicate copy of this sheet is enclosed.
- ☐ A check in the amount of _____ to cover the filing fee is enclosed.
- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No.
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- ☒ Any additional filing fees required under 37 C.F.R. 1.16.
- ☒ Any patent application processing fees under 37 CFR 1.17.


SignatureDated: **November 22, 1999**

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MARY L. THOMPSON
Typed or Printed Name of Person Mailing Correspondence

cc: